TO: Interested Parties

FROM: Ajhezza A. Gonzalez, Executive Director

Office of Boards & Council

DATE: August 14, 2002

SUBJECT: Office of Boards & Council Mailing Lists

Attached are the State Fiscal Year 2003 prorated duplicating and mailing fees for:

State Health Planning Board

Public Health Council

Health Care Administration Board

The Department of Health and Senior Services charges a mailing list fee to parties interested in receiving information pertaining to the HCAB, SHPB, and PHC meetings. These fees are based on the statutory duplicating fees in effect in the Department.

If you are interested in receiving this material, please complete the attached form(s) and send a check in the appropriate amount, made payable to the Treasurer, State of New Jersey and mail to:

> NJ Department of Health & Senior Services Office of Boards & Council South Warren & Market Streets PO Box 360 - Room 801 Trenton, New Jersey 08625-0360 Attention: Andrea Mahon

Additional information can be located at the Office of Boards & Council web-site, www.state.nj.us/health/commiss/obc.htm. If you have any questions please send an email to ajhezza.gonzalez@doh.state.nj.us.

Attachments

Option #3 - For your convenience, you may obtain the agenda on the Department Internet Site www.state.nj.us/health/commiss/obc.htm one week prior to the meeting date. Click on meeting schedule, then click on the date of the meeting and the agenda will appear. If you choose to have the notice and agenda mailed, see fee schedule below.

For State Fiscal Year 2003 the annual fees, are prorated monthly, are as follows:

STATE HEALTH PLANNING BOARD

Length of Subscription	OPTION #1 (Notice/Agenda/Trans/ & All Agenda Info)	OPTION #2 (Notice/Agenda/ Transcript)	OPTION #3 (Notice/Agenda)
July 2002 – June 2003 August 2002 – June 2003 September 2002 – June 2003	\$225.75 206.94 188.09	\$130.20 119.35 108.50	\$20.73 19.02 17.29
October 2002 – June 2003 November 2002 – June 2003	169.28 150.47	97.65 86.80	15.56 13.83
December 2002 – June 2003 January 2003 – June 2003 February 2003 – June 2003	131.66 112.85 94.04	75.95 65.10 54.25	12.10 10.32 8.35
March 2003 – June 2003 April 2003 – June 2003 May 2003 – June 2003	75.23 56.42 37.61	43.40 32.55 21.70	6.92 5.19 3.46
June 2003 Complete the information below.	18.81	10.85	1.73
NAME:			
TITLE:			
ORGANIZATION:			. <u> </u>
STREET ADDRESS:			
CITY/STATE/ZIP:			
PHONE:			
EMAIL ADDRESS:			·

Please make check payable to **Treasurer**, **State of New Jersey** and mail with completed forms to:

New Jersey Department of Health & Senior Services
Office of Boards & Council
South Warren & Market Streets
PO Box 360 – Room 801
Trenton, New Jersey 08625-0360
Attention: Andrea Mahon